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EPIDEMIOLOGY

No. 186

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16 May 1980

WORLDWIDE REPORT

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AFGHAN DOCTORS AID PAKISTAN IN HEALTH PLAN

Lahore THE PAKISTAN TIMES in English 18 Apr 80 p 12

[Text]

PESHAWAR, April 17: Participation of the Afghan medical personnel, who have crossed over to Pakistan, in the integrated health plan drawn up for the refugees jointly by the Pakistan Government and the United Nations High Commission for Refugees, was discussed at meeting held here today.

Representatives of the Society of Afghan doctors and other health personnel outside Afghanistan, submitted a list of 54 members of medical personnel, including 29 doctors, who were ready to participate in the health plan for their compatriots.

It was decided at the meeting that the Afghan doctors will initially man dispensaries in 24 of the 57 refugee tented villages.

After the arrival of the mobile health units, they will also visit the remaining villages.

An official hand-out issued here said funds will be made available to meet the needs of mobile health unit vehicles, dispensary tents, medical supplies, salaries and other recurring expenditure either from the UNHCR programme funds or from other donors.

The hand-out said arrangements are being made for the registration of the Afghan doctors so as to enable them to start work without any delay. About the doctors, who were unable to bring the documents with them some arrangements can be agreed upon through which the verification of their professional status by the society's executive board can be made the basis for their registration by the Pakistan Medical and Dental Councils.—APP.

CSO: 5400

WORLDWIDE AFFAIRS

BRIEFS

SAUDI ARABIA VACCINATION FACTORY FOR NEPAL--Islamabad, April 26--Prince Talal bin Abdel Aziz has undertaken on behalf of Saudi Arabia, to finance the entire cost of a proposed 1.5 million dollars Measles Vaccination Factory in Pakistan, it was reliably learnt here today. [Excerpt]
[Islamabad THE MUSLIM in English 27 Apr 80 p 1]

CSO: 5400

BRAZIL

BAHIA MUNICIPALITY LEADS IN SCHISTOSOMIASIS INCIDENCE

Ninety Percent Afflicted

Rio de Janeiro JORNAL DO BRASIL in Portuguese 14 Apr 80 p 16

[Text] Salvador--The small municipality of Catolandia, 887 kilometers from Salvador in the western part of Bahia, has the highest index of schistosomiasis in Brazil and perhaps the world. Studies made recently by the Special Health Service Foundation revealed 490 persons suffering from schistosomiasis in the municipal seat, where there are only 525 residents.

Prefect Anibal Teixeira confirmed the figures and said that he has already visited Salvador several times to show the figures to the SESP [Special Public Health Service] foundation, but with no results. He believes that the solution would be the use of two cylindrical wells drilled in the municipality but never put into use, because the machinery for pumping the water was taken away.

Polluted River

Catolandia is the smallest municipality in the state, with an area of only 417 square kilometers, smaller than the Agua Doce Ranch of former Governor Antonio Balbino, which is nearby. The prefecture of Catolandia has a budget of 1.8 million cruzeiros for this year, and 43 employees, of whom 24 are women teachers. The word Catolandia derives from the name--Catao--of the former owner of the ranch which covered the area of the municipality.

The prefect of Catolandia says that the number of individuals suffering from schistosomiasis is so great that those who have the means are leaving the village. The river which runs through it is so polluted that one cannot collect a bucket of water without getting some gastropods.

Figures Confirmed

Rio de Janeiro O GLOBO in Portuguese 14 Apr 80 p 7

[Text] Salvador--The secretary of health for Bahia, Jorge Novis, said that "it is perfectly possible" that 90 percent of the population of Catolandia is actually suffering from schistosomiasis. He added that the figures were not available for the moment, but that other municipalities in Bahia are in a similar situation.

"It is probable that some other municipalities have indices as high as those for Catolandia, because the state is very large and it has not yet been possible for us to cover all areas. In Catolandia, for example, there has never been any health service at all," Novis said.

The secretary explained that with the launching of the West Settlement Program last week, the state government decided to establish the first health unit in the municipality. The small station, which will not have a doctor, but will have nurses to provide urgent services and to refer the deserving cases to the nearest health center, will not be commissioned however for a year and a half.

In order to combat schistosomiasis in the 16th health region, which includes Catolandia, officials of the SUCAM [Superintendency for Public Health Campaigns] paid a visit to Barreiras, the capital of the area, last week.

According to Novis, a survey of the incidence of the disease in the entire region will be undertaken first, in order subsequently to launch a campaign to combat it, not only in Catolandia, but throughout the area.

"According to our plan, after the incidence of schistosomiasis is surveyed, the government will provide good-quality water for consumption," the secretary said. "Later on, we will sponsor the installation of toilets so that human waste will be suitably disposed of and not foster disease. Then we will eliminate the gastropods found in standing waters, treating the breeders of schistosomiasis, and finally, we will provide medication for patients from 7 to 21 years of age. But all of this will depend on keeping to the schedule, which as can be seen, is already under attack."

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CSO: 5400

BRAZIL

TYPHOID FEVER OUTBREAK IN NOVA IGUACU CONFIRMED

Fifty-Four Cases Reported

Rio de Janeiro O GLOBO in Portuguese 15 Apr 80 p 8

[Text] The municipal health secretary in Nova Iguaçu, Hildebrando Gianni Marins, confirmed yesterday afternoon that there has been a typhoid fever outbreak in the municipality, where 54 cases, mainly in the Rodrigo quarter, 10 minutes from the heart of the city, have been reported. Three persons are in critical condition in hospitals and clinics and dozens have been bedridden in their homes for some days.

There are two hypotheses about the origin of the outbreak of the disease: a ravine through which wastes from the anatomy laboratory at the Faculty of Medicine in Nova Iguaçu flows, and the water supplied by the CEDAE, reported to be contaminated. Yesterday 1,600 persons, the majority of them children, were vaccinated at the Faculty of Medicine in Nova Iguaçu, but the work was suspended at 1500 hours when the disposable syringes ran short.

Although the prefecture announced in an official communique that the focus of the disease is limited to the Rodrigo quarter, residents in Miguel Couto, Cafoaba and Vila de Cava have also been affected by the disease, the main symptoms of which are high fever for several days, vomiting, diarrhea, reddish urine and generalized pain. Mass vaccination, in particular of residents of the Rodrigo quarter, continued today, beginning at 0900 hours, in the Higher Education Association of Nova Iguaçu (SESNI) gymnasium.

The Outbreak

The outbreak of typhoid fever was first noted by mechanic Jorge Lopes de Azevedo Franca, 15 days before Holy Week began, when neighbors complaining of symptoms of the disease began to seek him out at his residence at No 119 D. Henrique Street. At the beginning he thought it might be malaria or hepatitis, and he therefore applied to the local office of the SUCAM [Superintendency for Public Health Campaigns]. However he was told there that there were no vaccines nor any laboratories for analyzing

the samples he had collected from the residents on his own initiative. It was not until yesterday, after a private laboratory confirmed the typhoid fever outbreak, that health authorities took some therapeutic and prophylactic steps to combat the disease--vaccination of all of the residents near the Rodrigo quarter, medication for the afflicted individuals, cleaning and clearing of the streets, ditches and ravines and the establishment of a fixed health station for the region for as long as the problem persists, to treat and educate the population. According to an official statement from the Nova Iguaçu prefecture, the causes of the outbreak are unknown. Analyses have been undertaken by the competent state public health bodies. But as a prophylactic measure, it is now recommended that residents of the region drink only boiled water, make sure that they obtain vaccinations and be on the alert for the symptoms of the disease. According to the municipal secretary of health, there is no reason for alarm, since in his view, the outbreak is entirely under control.

Advance Post

Jorge Lopes de Azevedo Franca said yesterday that he went to the Vaco Barcelos State Health Station, but found no resources there for combating the disease. He then decided to convert his residence into an "advance health post" where he personally has vaccinated more than 600 persons since Saturday, when he made his diagnosis of the disease affecting the vast majority of his neighbors. Jorge has devoted himself entirely to combating the typhoid outbreak and has not gone to work for 14 days. "I need to care for the sick, since no official measures have been undertaken by the competent authorities, although the prefecture has been officially instructed to maintain a permanent office locally to assist the entire population," he said.

"Everything suggests that the causes of this outbreak of typhoid are to be found in the lack of basic municipal sanitation where the water with which the CEDAE provides us is concerned, which has been contaminated for 20 days now, when the distribution network for this locality was put into use, and in the existence of a ditch in which the Faculty of Medicine throws all the refuse and human waste not utilized by its anatomy laboratory. From what we have learned, even the water used by the anatomy laboratory for washing cadavers in academic instruction is thrown into this ditch, which winds through the main streets of our quarter. This is an absurd situation," Jorge Franca said.

Many Cases

According to Jorge Franca, there are other typhoid cases among the residents on Jose Pacheco Street, located in the Maria Jose housing complex, and in the Caioaba, Miguel Couto and Vila de Cava districts. He also reported that the assistance of the FEEMA (State Environmental Engineering Foundation) will be requested by the Epidemiological Coordination Division of the State Health Department. He said further that the FEEMA will undertake an analysis

of the water supplied by the CEDAE and will inspect the ditch where the Nova Iguacu medical faculty dumps its wastes.

The daughter of Dona Maria Zilda de Jesus Ferreira, Wilma Almeida de Oliveira, 13 years of age, said yesterday that she has been sick for 10 days, in which period she has already lost 8 kilograms. She is suffering from high fever, diarrhea, vomiting, excessive thirst and dry lips.

Jorge's wife, Denise Maria Ferreira Franca, and her daughter Vania, age 7, also are suffering severe headaches and lack of appetite. Marble worker Pedro Jose Benjamin, who lives on D. Henrique Street, is confined to his bed. His lips are cracked and his body is completely mottled. He has not been able to eat for a week. The 7-month-old son of Maria de Fatima Rosa de Sousa, Alexandro, has had fever for 18 days, coughs almost incessantly and vomits whenever his mother attempts to nurse him.

Laboratory Results Awaited

Rio de Janeiro JORNAL DO BRASIL in Portuguese 16 Apr 80 p 5

[Text] The director of the Nova Iguacu Health Center, Telemaco Boldrin, has reported that the municipality has had 80 cases in recent months evidencing the clinical symptoms of typhoid fever. Fifty specimens have now been taken and sent to the laboratory for analysis. The results of 30 of them will be known today.

He said moreover that two cases were confirmed as typhoid fever, and he attributed them to the lack of sanitation and contamination of the water. As to the existence of an outbreak, as pronounced by Municipal Health Secretary Hildebrando Gianni Marine, he said that he found this "hasty," because the results of the laboratory analysis are not yet known.

Specimens

Following the announcement of a typhoid fever outbreak by the municipal health secretary, the Nova Iguacu Health Center began to take specimens in the Vila de Cava, Miguel Couto, Don Rodrigo and Caloba districts, and these were dispatched to the Dr Emerson and Jose Luiz Ribeiro State Public Health Institute (IESP) laboratory.

It all began when residents in the Don Rodrigo neighborhood went to the Secretariat of Health to complain that the Faculty of Medicine in the municipality is dumping wastes from the anatomy laboratory in a ravine which contaminates the water supplied to the people by the CEDAE.

Since then, a vaccination campaign has been begun. About 2,000 persons the majority of them children, have been immunized. The campaign continued

yesterday in the gymnasium of the Nova Iguacu Higher Education Association, where the doctor in charge said that the vaccination is a preventive and routine measure, like that being carried out in Sao Joao de Meriti and Duque de Caxias.

The visiting health representative from the State Secretariat of Health, Maria Ramos Mota, explained that cases of typhoid fever normally occur after floods. In the case of Nova Iguacu, she attributed the disease to the lack of sanitation and hygiene measures. She did not however confirm the existence of an outbreak.

Official Statement

In an official statement, the prefecture of Nova Iguacu stated it did not know of any outbreak of typhoid fever and confirmed that the matter had already been turned over to the state public health authorities for practical analysis.

The prefecture recommended prophylactic measures, advising the population in the municipality to drink only boiled water and to see to the vaccination of the children. It stressed that there is no reason for alarm, for there exists nothing more than a suspicion.

The state health authorities are awaiting the results of the analyses before issuing an official statement and "establishing those responsible for a false alarm."

Five Typhoid Cases Confirmed

Rio de Janeiro O GLOBO in Portuguese 17 Apr 80 p 14

[Text] The director of the Nova Iguacu Health Center, Telemaco Boldrin, announced last night that blood tests made at the IESP laboratory at the request of the prefecture of Nova Iguacu established five positive cases of typhoid fever in the Dom Rodrigo district. The disease, he said, is considered by the World Health Organization as a thing of the past.

The laboratory analyzed 17 specimens: 9 proved negative and the results on the other 8 have not yet been supplied by the laboratory.

Boldrin said that the General Epidemiological Department of the State Secretariat of Health has been asked to provide a team specializing in communicable diseases beginning today to collect blood samples from patients with symptoms similar to those of typhoid.

Vaccination

Yesterday more than 5,000 persons were vaccinated in the SESNI gymnasium and the Dr Vasco Barcelos Health Center.

In the afternoon, the CEDAE informed the state and municipal health authorities that an analysis of the water consumed in the Dom Rodrigo neighborhood revealed no contamination. The director of the IESP, Alberto Gomes da Luz, said that the negative results of nine of the blood tests made by the laboratory "does not rule out the possibility of an outbreak of typhoid fever." He said that the number of specimens analyzed "was not sufficient to make a broad definition, leaving no doubt, about an outbreak of typhoid fever in Nova Iguaçu or the lack of it."

The Nova Iguaçu municipal health secretary, Hildebrando Cianne Martins, confirmed the five typhoid fever cases. He said that the clinical picture for the more than 50 patients he has seen shows "a definite improvement," and that none are any longer in coma. Hildebrando said that "it is not a matter of an epidemic but rather an endemic outbreak, now under control by the state and municipality." No health authority could say whether the number of cases of individuals with symptoms similar to those of typhoid fever had increased or decreased. Day before yesterday 84 persons were being treated in hospitals and private clinics in Nova Iguaçu.

To strengthen the mass vaccination campaign, the State Health Secretariat will make available to the doctors and nurses at the Vasco Barcelos Health Center 2 vaccination pistols and another 10,000 doses of vaccine against typhoid fever. Yesterday all of the vaccines on hand at the health centers in Caxias, Meriti and Nilopolis were collected to strengthen the vaccination campaign in Nova Iguaçu, where there are slightly more than 5,000 doses of vaccine available to the health authorities.

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BRAZIL

INCIDENCE OF LEPROSY RISING IN STATE OF SAO PAULO

Sao Paulo O ESTADO DE SAO PAULO in Portuguese 9 Apr 80 p 16

[Text] According to 1976 figures, 1.82 cases of leprosy were reported in the state of Sao Paulo per 1,000 inhabitants, while during the decade between 1969 and 1978 a rising trend was seen in the curve reflecting new cases of the disease. This figure exceeds the 1 case per 1,000 inhabitants established by the World Health Organization as the level above which leprosy should be regarded as a public health problem. These statements are made in an 18-page document delivered to the secretary of health, Adib Jatene, yesterday by the Association of Public Health Physicians in the state of Sao Paulo.

"Our state now exceeds 2,000 new cases reported per year, and we know it would be possible to diagnose twice as many or more with effective medical care coverage of the population," a part of the document says. It adds that "the proportion of contagious forms in relation to the total number of cases reported has remained at about 50 percent, while 70 percent of the cases were already in an advanced stage when diagnosed. In addition to this, 45 percent are only discovered after the patient has been ill for more than 3 years, while we are informed about 57 percent from institutions other than the State Health Secretariat."

On the basis of these figures, the document concludes that "the prevalence of leprosy has increased in the past decade, and this is due on the one hand to the accelerating deterioration of living conditions for the people, particularly in the outlying areas. The problems of migration, lack of basic sanitation, the decline in purchasing power and poor nutrition which lead to illness in the population are rather well-known." On the other hand, the document says that public health physicians "observe that the control measures urged by the World Health Organization are not being implemented. The people do not have access to medical services so that leprosy can be diagnosed in the early stages."

The document delivered to Secretary Adib Jatene indicates that "the committee for the assessment of the leprosy control subprogram which has been pursued by the Community Health Coordination Department of the

secretariat notes three shortcomings in the program: the current qualitative and quantitative inadequacies in the skilled and auxiliary personnel; frequent shortage of specific medications at the health centers; and difficulties in the establishment and functioning of the information system."

The public health physicians analyzed the four main bottlenecks they regard as the reasons for the lack of efficiency in controlling leprosy by the state government: human resources, health center network infrastructure, education for health and health policy. In addition to this, they presented Secretary Adib Jatene with 5 proposals of a general nature and 15 more specific ones. Jatene met with the 20 public health physicians headed by the president of the association, Maria Bernadete de Paula Eduardo, indicating his satisfaction with this indication of interest, but excluding any possibility of an increase in the slightly more than three percent of the state budget allocated to the health secretariat.

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BRAZIL

POLIO IMMUNIZATION CAMPAIGN PLANNED FOR PERNAMBUCO

Rio de Janeiro JORNAL DO BRASIL in Portuguese 17 Apr 80 p 8

[Text] Recife--"We must show the world that we are capable of vaccinating our children against poliomyelitis," the state secretary of health, Dr Djalma Oliveira, said yesterday at a meeting to prepare for the vaccination campaign to be launched throughout the country on 14 June.

He said that "this is a civic appeal, a matter of national honor. We must show that we are health and not disease workers. We need to vaccinate all of our infant population under 4 years of age, and if some fail to be vaccinated, the fault will be ours."

During the meeting, Dr Djalma Oliveira appealed for total mobilization in the campaign of vaccination against polio, "as if Pernambuco were in an emergency health situation." He stressed that he has never been so enthused by anything as he is by this vaccination campaign.

Technicians from the Ministry of Health, the Federal Health Office, the Epidemiological Coordination Division, the SESP [Special Public Health Service] Foundation, the Superintendency of Public Health, the INAMPS [National Institute for Social Security Medical Assistance], the MOBRAL [Brazilian Literacy Movement] and the Health Integration Center participated in the meeting.

The secretary said that no effort should be spared to enlist all of the community leaders in the most remote localities of Pernambuco, as well as teachers, priests and religious workers in general, in addition to leaders of professional organizations or popular and political groups. He announced that the polio committee will be placed on a "permanent session" schedule in order to deal with all the details involved in the campaign.

Among the indications of solidarity following the disagreement between the minister of health and scientist Albert Sabin, Mr Waldir Arcoverde has received a letter from university Professor Lauro Soltero, praising him

for his self-control because of the fact that "although profoundly injured, you did not react to the provocation and aggression committed by one from whom at least a certain emotional control was expected."

An honorary member of the Brazilian Academy of Sciences and the National Academy of Medicine, the professor believes that scientific discussion is no longer characterized by "the magister dixit, infallibility, the gift of truth," when "Brazil is suddenly faced, on television, radio and in the newspapers with the lack of restraint, the verbal insolence of a man who, because of his authority as a scientist, his international prestige, should at least respect opinions which do not coincide with those he defends."

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BRAZIL

MEASLES VACCINATION CAMPAIGN PREPARED IN PARANA

Rio de Janeiro JORNAL DO BRASIL in Portuguese 17 Apr 80 p 8

[Text] Curitiba--The occurrence of more than 6,000 cases of measles in Parana this year has led the State Secretariat of Health and Social Welfare to plan a mass vaccination campaign for next month similar to that carried out against poliomyelitis at the beginning of the year. The immunization of at least 80 percent of the 1 million children is necessary in order to prevent another outbreak.

Secretary of Health Oscar Alves said, on making this announcement, that there were 10,000 reported cases last year. This year, almost 1,000 cases have been reported, affecting mainly the cities of Curitiba (south), Campo do Mourao (north), Cascavel (west) and Francisco Beltrao (southwest), but the Epidemiological Control Department believes that the actual number of cases comes to 6,000.

Secretary Oscar Alves appointed a special committee to define the vaccination schedule to be pursued within the coming months. Vaccination against measles, although it requires only one dose, is more difficult than vaccination against polio. While the Sabin vaccine is applied in drops, the vaccine against measles must be applied by syringe or using a pressure injector.

The use of pressure injectors, although a speedier method, requires the amassing of large numbers of those to be vaccinated at one time, which is only possible in more costly campaigns.

Dr Paulino Kotaka of the Secretariat of Health explained that measles is caused by a virus, and its symptoms are fever, cough, coryza, and conjunctivitis, followed by reddish eruptions which begin on the face and in time spread down the trunk and limbs. The disease affects general health and lowers body defenses, and is thus often "complicated" with bacterial infections such as bronchopneumonia and otitis developing. There is no shortage of vaccine, the health ministry reports.

BRAZIL

BRIEFS

YELLOW FEVER CAMPAIGN--Since last 20 March, no focus containing the larvae of the mosquito *Aedes aegypti*, which carries urban yellow fever, has been found in Santos. For this reason, the Superintendency for Public Health Campaigns (SUCAM) will hold a meeting of the Health and Hygiene Secretariat of the Municipality to assess the campaign to eliminate these mosquitos which was begun on 27 February. In that month the SUCAM found 3 breeding centers for the larvae of the mosquitos in the Macuco quarter, and since then 40 employees of that agency have been waging a lightning campaign to eliminate them. The regional superintendent of the SUCAM for Santos, Ira Belem da Silveira, said yesterday that his staff has made a detailed survey of the Macuco quarter, eliminating every breeding center found within a radius of 1,500 meters, and that no more larvae have been found in the recent weeks. The meeting to assess the campaign to eradicate the mosquitos which carry yellow fever will also serve for a general explanation to the population, for according to the regional SUCAM superintendent, the hindrances and minor difficulties caused are insignificant in comparison to the importance of eliminating the breeding centers for the larvae.

[Text] [Sao Paulo O ESTADO DE SAO PAULO in Portuguese 4 Apr 80 p 7] 5157

CSO: 5400

BRIEFS

CAMPAIGN AGAINST WHOOPING COUGH--The Ministry of Health will step up its anti-whooping cough vaccination campaign beginning next Monday, according to information released by the director general of health, Dr Leonardo Maranghello. The official revealed that up to now 186 cases of this disease have been recorded throughout the country. This makes it necessary to strengthen control measures to prevent an increase in the number of cases. For this reason, it is advised that all children under the age of 6 years who have not been vaccinated in over a year receive a booster shot. Dr Maranghello said that at the same time last year, only 30 cases of whooping cough had been recorded in the country; therefore, it is hoped that the new preventive measures will put an end to the current small outbreak. [Text] [San Jose LA REPUBLICA in Spanish 3 Apr 80 p 2] 8143

CSO: 5400

TOPICS DISCUSSED IN ANNUAL PEDIATRIC THERAPEUTIC BRIEFING

Athens I KATHIMERINI in Greek 15 Apr 80 p 4

[Article by Loukia Petrissi: "Drop in Hepatitis Cases in Schools"]

[Text] The 13th Annual Pediatric Therapeutic Briefing organized by the First Pediatrics Clinic of Athens University concluded its sessions Sunday. It dealt with the following pediatric topics:

'New Hepatitis Vaccine'

Madame E. Valassi-Adam spoke about the new type B hepatitis vaccine which was successfully tested on medical personnel but which has not yet been used commercially in any part of the world. The vaccine tests of the Athens University Pediatric Clinic have shown that the vaccine, while not causing any side effects, developed satisfactory anti-body responses on more than 90 percent of those vaccinated.

'School Problems'

Moskhos said that the diseases which cause great concern among parents and create turmoil in schools when their presence among pupils is detected, are three: communicable hepatitis, purulent meningitis and scarlet fever.

In recent years, no increase in hepatitis cases has been noted in Greece in general and in schools in particular, nor have there been any epidemics. Occasionally there is more than one case in a school during the school year but this is very infrequent. In the event of a [hepatitis] case the school should not be closed. Instead, more attention should be paid to cleaning and pupils particularly should learn to wash their hands well after using the toilet and before eating. Gamma globulin should be given to pupils only in the event of a real and widely spread epidemic in the school.

Purulent meningitis is rare in schools but it causes deep fear among parents because of its gravity. The children are infected through germ-carrying adults in their environment. If such a case appears, the school should not be closed or disinfected nor is it necessary for the rest of the pupils to take preventive antibiotics since it is certain that they will not be in danger.

Finally, scarlet fever has completely changed and today is considered a mild illness without complications. The sporadic cases in pupils of a school should not cause anxiety to the parents of the other children for which there is no need to take any special preventive measures.

Th. Karpathios said that conjunctivitis (red eyes that cause teariness and can be gummy) is very frequent among children. It is caused by viruses, a family of trachoma and other microbes, allergies and foreign bodies. Most of the time it disappears without any treatment. But on occasion it may cause permanent injury to the eye, even blindness. Trachoma, which is a form of conjunctivitis, continues even today to be the major cause of blindness in the world. A child with any form of conjunctivitis which continues for a few days and is accompanied by pain, pus or swelling of the eyes should see a doctor.

'The Inflammations'

I. Messaritakis said that skin inflammations of any type and from any cause (whether simple, or caused by fungus, microbes, etc.) dictates the elimination of the conditions contributing to skin wetness and rashes such as temperature rise, continued wetness and poor ventilation of the infant's skin area covered by diapers (perineum area). A major factor for such conditions are the disposable plastic diapers which should be avoided and replaced with simple cloth ones. If the inflammation is acute then the area should remain uncovered for several days and exposed to light and air. Lukewarm salt water compresses should be applied and, in persistent cases, cortisone-containing cremes should be used. If the inflammation has caused complications, proper oral antibiotics should be administered.

'Brain Axial Tomography'

S. Giouroukos said that axial tomography is a new revolutionary contribution in the diagnosis of brain illnesses. It is painless, non-dangerous and provides much greater information than any other diagnostic method. The major disadvantage of this method is its high cost coupled with the fact that up until now no state hospitals have been equipped with axial tomographs.

'Vitamin D'

Madame P. Nikolaidou said that children suffering from chronic diarrhea, chronic hepatitis and kidney deficiencies are in danger of developing rickets. Also children who chronically take cortisone or drugs for epilepsy are exposed to great danger of rickets. These children should be given greater doses of vitamin D.

'Leukemia Treatment'

S. Khaidas said that in the past 15 years the treatment of lymphoblastic leukemia in children aims not only at prolonging their lives but at

completely curing them as well. Thus, 50 percent of the sick children live more than 5 years and most of them are considered cured.

The Athens University First Pediatrics Clinic's unit for the diagnosis and treatment of leukemia and other malignant childhood diseases has been using since 1972 an international therapeutic protocol (ALOH) with equally good results. This unit is bringing to this therapeutic informative meeting an optimistic message: Seventy three percent of the children treated in accordance with this international protocol are experiencing a first phase improvement for a period of from 9 to 96 months. It is worth noting that 55 percent of the sick children have already completed 5 years of treatment and have not been under any treatment for 2 to 36 months. It should also be pointed out that these children live and move about in their natural environment as completely physiologically healthy children, while the clinical and laboratory monitoring shows that they are as efficient as other children of the same age.

On the contrary, most of the sick children who did not undergo this intensive treatment had relapses in the first 3 years since the diagnoses and were lost.

The results of this unit reaffirm that the application of intensive treatment, long and arduous as it is for both the children and the doctors, is today ethically and scientifically necessary.

'New Antibiotics'

Madame V. Syriopoulou said that eight new antibiotics have been introduced in Greece and more are expected [in the future]. These new antibiotics are fighting common microbes (staphylococcus, streptococcus, colobacteria, et. al.) which have become immune to the old antibiotics due to their abuse. Nevertheless, these antibiotics also cause side effects and there is danger that they too can develop resistance from possible abuse. For this reason no antibiotics should be given to every child with fever because the development of immunity is dangerous. This may render us incapable of coping with serious infections in children in the future.

7520
CSO:5400

BRIEFS

CHOLERA IN ANDHRA PRADESH--New Delhi, 21 Apr--Cholera has claimed 110 lives in Karimnagar District of south Indian Andhra Pradesh during last one month. The state's minister, Madar Mohan, told the Press in Hyderabad, the state capital, that out of 591 cases reported since March 14, 110 proved fatal. He said 127 villages were affected by the cholera. "The situation is now under full control," the Minister claimed. NAB/AFP [Text] [Rangoon THE WORKING PEOPLE'S DAILY in English 23 Apr 80 p 2]

GASTROENTERITIS DEATHS--New Delhi, April 9: At least 89 persons have died in a two-week-long gastro-enteritis epidemic in Karimnagar district, southern India, the United News of India reported yesterday. Cholera also was reported but no deaths have been attributed to the disease. --APA [Text] [Lahore THE PAKISTAN TIMES in English 10 Apr 80 p 8]

RABIES VACCINE SHORTAGE--There has been a spurt in dog bite cases in West Bengal because of an increase in the population of stray dogs. Mr Nani Bhattacharya, Health Minister, told reporters in Calcutta on Friday that as many as 50,000 dog and animal bite cases had been treated in Government hospitals last year. He said that though the Pasteur Institute in Calcutta manufactured anti-rabies vaccine in good quantity, there was a shortfall in supply as it had to meet the demands of other eastern and north-eastern states, besides West Bengal. A majority of the dog-bite cases were reported from the rural areas. The rural health centres had requisitioned 293,832 ml of the vaccine. Although the production of vaccine was being increased from 3.4 million ml to 5 million ml, the Pasteur Institute was facing the problem of getting an adequate number of sheep from whose brain matter the vaccine was made. Mr Bhattacharjee said that people had wrong notions about the dosage of the vaccine and the State Government would soon start an education campaign. The municipalities and panchayats would be asked to destroy the stray dog population. [Text] [Calcutta THE SUNDAY STATESMAN in English 30 Mar 80 p 3]

CSO: 5400

HIGH INCIDENCE OF RABIES REPORTED

Mortality Rate High

Jakarta KOMPAS in Indonesian 19 Mar 80 p 7

[Excerpts] According to the results of a study, every 10 days a person suffering from rabies dies in Indonesia. This is according to a KOMPAS source. Rabies is also known as the "mad dog disease," because the virus is spread to human beings through the saliva of a dog or cat, which enters the body through a bite.

Up to now the death figure in Indonesia for rabies is still 100 percent if not treated. The total number of bite cases is around 12,000 per year, but the total number of persons suffering from rabies which is reported is only about 60 cases per year.

The area where rabies is spread covers 19 provinces. The areas which are free of rabies are Bali, Maluku, Irian Jaya, Nusa Tenggara Barat, Nusa Tenggara Tengah, Timor Timur, Kalimantan Barat, and Kalimantan Selatan.

Previously, a person who was bitten by "a mad dog" had to have 14 injections. The side effects may include brain fever. At present there is also available a vaccine which is better. Human Diploid Cell (HDC) only requires to be given by injection six times: once after having been bitten, once on the third day, the seventh day, the 14th day, the 30th day, and the 90th day.

Quarantine Declared in Padang

Jakarta SINAR HARAPAN in Indonesian 18 Mar 80 p 3

[Excerpts] The city of Padang has been declared to be an area affected by the mad dog disease (rabies), according to the regional secretary, Dr Akman Syarif, in a statement issued to the press in behalf of the Mayor on Friday, 14 March, in Padang.

The statement of the Mayor closes the area of the city of Padang to dogs brought in from 19 January to 18 May 1980 (four months), as a consequence

of the spread of the disease. In a step aimed at preventing the spread of rabies the Mayor issued his statemnt on 13 March 1980.

All dogs which were outside the closed area when declared must wear a muzzle. For anyone who brings a dog onto the main streets or into a public place, the dog must be held with a strong leash, whose length must not be more than two meters.

The Mayor warned that all dogs found running free in the city of Padang and not meeting the foregoing requirement will be destroyed by the police or by an official appointed for that purpose.

Adman Syarif stated that any dog, cat, or monkey should immediately be brought to the Veterinary Service to be injected with anti-rabies vaccine. He warned residents of the city of Padang that, from 19 January to 18 May 1980, the entry or exit is prohibited for any dog, cat, or monkey, into or out of Padang, unless with a permit from the Ministry of Agriculture.

5170

CSO: 5400

BRIEFS

ACUTE GASTROENTERITIS IN SULAWESI--Fifteen persons living in the Tallo District of the city of Ujungpandang died over a period of 12 days from gastroenteritis, after showing signs of having contracted the disease on 6 March. The chief of the Community Health Center of Ujungpandang, Dr Adnan Machmud, stated that six persons among the residents of that area could not be brought to the Community Health Center. Up to the present, the total number of persons suffering from the disease is stated to be 400, with 200 persons being treated at the Community Health Center in Ujungpandang and 200 others being treated in their respective homes. On the instructions of the acting mayor of Ujungpandang, chlorination of all wells in the area is being carried out in order to prevent the spread of the disease to other areas. The sub-district of Djamaluddin reports that about 2000 wells have so far been chlorinated. This sub-district has about 59,000 wells. [Excerpts] [Jakarta SINAR HARAPAN in Indonesian 20 Mar 80 p 12] 5170

BALI DEATHS FROM MEASLES --Thirteen children have died of measles in the Pekutatan and Mendoyo district in the Regency of Jemberana. Dr. Kastama from the Jemberana Regency, was contacted in Denpasar on Tuesday, and he confirmed the fact that the disease has broken out there. It has been reported to the Department of Health in Bali Province. He said measures have been taken to improve children's resistance to the disease by giving vitamins and food high in nutritional value. Strangely, according to Dr. Kastama, when they went to check the patients at locations where the disease had spread, they found that parents had hidden sick children. These people believe that the measles, which they call "medewa," may not be seen by anyone except the family of the patient. The children who have contracted the disease are soaked and bathed continuously, causing other complications, and then they die. "This disease can be cured and need not be kept secret," said Dr. Katama. [Text] [Jakarta PELITA in Indonesian 28 Feb 80 p 3] 5400

CSO: 5400

EPIDEMIC OF CEREBRAL MEMBRANE INFLAMMATION

Jerusalem HANODI'A in Hebrew 10 Apr 80 p 4

(Brief: "Sharp Rise in Number of Cases of Cerebral Membrane Inflammation")

[Text] Health ministry chief epidemiologist Dr Tiberiu Schwartz confirmed on 1 April that there is a rise in the number of cases of cerebral membrane inflammation which started in the fall of 1979.

Dr Schwartz stressed that the disease is not serious and has no known complications. Most patients are school age and preschool children. Most of the children who contract the disease are confined for only a few days.

The various health offices have reported a total of 124 cases in the last 3 months of 1979, or a 4-fold rise compared with the same period of the previous year. In addition, there were 585 cases reported in the first 3 months of 1980. Again, this is a 4-fold rise compared with the same period of 1979. Most cases were reported in the south near Beersheba and in the north near 'Afula.

In recent months, many cases were reported around Beersheba. There were also many cases reported near Safad. Similarly, there is a rise in the number of cases in the regions of Kineret, Ashkelon, Haifa and also in the central regions.

Lab tests identified the presence of an E-coli type virus. Tests showed that it is of a type that has not been seen here in previous years. This may explain the spread of the disease and the significant rise in the number of cases.

8646

CSO: 5400

POLIO IMMUNIZATION PROGRAM TO COVER ENTIRE COUNTRY

Blantyre DAILY TIMES in English 18 Apr 80 p 3

[Text]

CHIKWAWA
Wednesday

THE Ministry of Health is carrying out a national Expanded Project of Immunisation (EPI) which is aimed at mass immunisation of children against polio.

The project which is under the Department of Maternal and Child Health is the second of its type (the first was immunisation against measles). It is jointly funded by the Malawi Government and the Save the Children Fund.

The project has been started in Chikwawa and Nsanje and will next move to Mulanje/Thyolo areas eventually spreading northwards to the Central and Northern Regions. It is projected that by the time the project gathers momentum, about eight districts will be covered at a time and at this rate, it will be expected to cover the whole country in 15 months' time, spending roughly four weeks in a single district.

A project Supervisor who is also the Operations Officer is responsible for co-ordinating project staff and liaising with

both Party and traditional leaders.

Before a vaccinating team is sent to an area, Chiefs and Party leaders are advised by an advance publicity officer, to summon mothers to gather at a particular collecting point where all the children of up to two years of age would be vaccinated against polio.

A vaccination team is then sent to the collecting points. Before being vaccinated, the children are registered and then issued with an underfives clinic attendance card.

With the help of maps and population targets the vaccination team checks the number of projected children and the actual number vaccinated to find out the number of possible deserters before moving off to another area.

After vaccination, mothers are strongly advised to take their children to the underfives clinics with the cards issued to them to get vaccinations against other diseases like measles, TB and whooping cough. This will help the mothers take their children to the underfives clinics in future.

MALAWI

BRIEFS

ANTILEPROSY MEASURES THROUGHOUT COUNTRY--With the establishment of a Lepra Unit in Kasungu in the Central Region, the project's activities now cover all areas in the country, Mr. J.H. Eldon, said. Mr. Eldon, who is Manager of Lepra project in Malawi said when the project was initiated in 1965, it only covered parts of Thyolo, Chiradzulu, Zomba, Blantyre and Mulanje districts in the Southern Region but now the project's activities have spread to the Central and Northern Regions. The Southern Region is served by centres at Likweni, Balaka and Ngabu; Lilongwe caters for the Central Region, while Chilumba in Karonga caters for the Northern Region. The project manager said that in order to effectively treat patients in the remote areas, the project has clinic attendants all over the country who reach patients in their respective homes by using bicycles. These attendants are responsible to supervisors who are also provided with motorcycles. "This programme of treating patients in their homes was launched in 1979 and is found to be more economical than the first one, whereby we visited patients using mobile Land Rovers," he added. Asked what progress the project had made so far, Mr. Eldon said the response of patients has been encouraging, and added that last year about 23,000 patients registered for treatment, with about 1,000 patients when the project was in its preamble stages in 1965.--MANA [Text] [Blantyre DAILY TIMES in English 2 Apr 80 p 3]

CSO: 5400

METHOD OF CONTROLLING DIARRHEA IN CHILDREN TESTED

Kuala Lumpur NEW STRAITS TIMES in English 22 Feb 80 p 5

[Text]

KUALA LUMPUR, Thurs. — Malaysia is testing a cheaper, painless method of controlling diarrhoeal diseases in children.

It is a solution to be taken orally in place of intravenous medication being given now.

Health Director Dr Haji Talib Latiff said evaluation was being made to determine the practicality of the solution which is made of table salt, baking powder, potassium chloride and sugar.

If found feasible, the solution would be made available to the public, he said.

He said the solution had been recommended by the World Health Organisation (WHO).

WHO had urged all developing countries to have large-scale 'solution' programmes against diarrhoeal diseases.

Weight

The organisation had also suggested that ideally, the solution should be

made available to mothers in premeasured and prepacked waterproof foils, through primary health care workers.

Two packets of the mixture dissolved in one litre of water was sufficient to re-hydrate ailing children.

A WHO report said field trials in six countries had shown that children given the solution during bouts of diarrhoea had gained weight.

Meanwhile, the manager of the WHO diarrhoeal disease programme, Dr Dhiman Barua, said it was the use of the solution in combination with better child care practices that was likely to have the greatest and immediate impact in preventing deaths from acute diarrhoeal diseases.

DECREASE IN MALARIA RATE IN KELANTAN STATE

Kuala Lumpur NEW STRAITS TIMES in English 4 Feb 80 p 10

[Excerpts]

KOTA BARU, Sun. —

There has been a considerable decrease in the number of malaria cases in Kelantan since the malaria eradication programme was implemented in 1969.

According to statistics from the General Hospital's Record Office, the morbidity (illness) rate per 10,000 population has dropped from 60.67 in 1970 to 33.31 last year.

The State Medical and Health Director, Dr Jones Varughese, said this figure was expected to drop further to 30.99 in 1981, the final year for the programme.

Dr Varughese said for as long as there were mosquitoes, it was impossible to eradicate malaria in Malaysia.

"Our target is to reduce the disease to its lowest level of intensity," he added.

The Health Department has 29 health teams for its malaria eradication programme with eight teams based in various land schemes.

As the disease is also rampant in South Thailand, where the malaria parasite has been found to have formed resistance to normal anti-malaria treatment, the Health Department has designated Pasir Mas and Tumpat Districts as the malaria buffer zone.

CSO: 5400

EIGHTEEN DEATHS FROM DIPHTHERIA IN SARAWAK

Hospitals Declared Infected

Kuala Belait BORNEO BULLETIN in English 16 Feb 80 p 28

[Excerpt]

KUCHING. — Hospitals in Kuching, Bandar Sri Aman and Sarikei have been declared infected areas as diphtheria continues to spread through the First and Second Divisions of Sarawak.

So far 13 people have died from the disease and 126 cases have been reported since the epidemic took hold in August.

Kuching General Hospital and Bandar Sri Aman General Hospital have both set up isolation

wards for diphtheria patients; in Bandar Sri Aman the ward is the one that was used to isolate TB patients.

Members of the public are banned from the isolation wards and other visitors to the hospitals must produce passes issued by security staff now on duty at hospital entrances; only two people at a time are allowed to visit patients in other wards.

And while hospital staff take urgent measur-

es, Medical Department teams have been visiting schools and government offices in the two divisions to vaccinate people against the disease, mainly seen in young children but now reaching several adults.

Of the 126 cases, 56 have been reported this year; three of the deaths have also been this year, all children from the Second Division who had not been vaccinated against diphtheria.

Until last week the disease had been confined to mainly rural areas but has now spread to Kuching itself with three children and two adults being admitted to hospital.

Immunization Campaign

Kuala Lumpur NEW SUNDAY TIMES in English 17 Feb 80 p 7

[Excerpt]

KUCHING, Sat. — A massive anti-diphtheria campaign is now under way in Sarawak. More than 43,000 people have been vaccinated since the launching of the programme recently. In the Second Division (the worst affected area), some 20,000 people have been vaccinated.

The epidemic has so far claimed 18 lives, with all the victims under 15. Of 131 cases reported since the outbreak in August last year, 82 were below 15. Except for the Fourth and Fifth Divisions, the rest of Sarawak is affected.

Deputy Health Minister Dr Sulaiman Daud, who visited affected areas in the Second Division, said: "The last time the disease was reported was more than 10 years ago. There is no cause for alarm as the Ministry is taking all possible measures to contain its spread."

He said 66 immunisation and investigation teams under the supervision of the state director of medical services, Dr Tan Yaw Kwang, had been deployed.

CSO: 5400

CHOLERA REPORTED IN WEST, EAST MALAYSIA

Three Cases in Kedah State

Kuala Lumpur NEW STRAITS TIMES in English 6 Feb 80 p 11

[Text]

ALOR STAR, Tues. — Three cases of cholera have been confirmed in the districts of Kota Setar and Kulim this year, a spokesman of the State Medical and Health Services Department said today.

He said a carrier of the disease was also detected. He is a 55-year-old man from Kuala Kedah who is still undergoing treatment at the General Hospital here.

The three cases are a 55-year-old man from Lunas, a 10-year-old girl from Jenat, Mukim Tualang, and a two-

month-old baby girl from Kampung Tek Pasai, Kuala Kedah.

The spokesman said the first case was admitted to the Kulim district hospital on Jan. 10 and was discharged 17 days later.

Under control

The 10-year-old girl was admitted to the General Hospital here on Jan. 18 and was discharged on Jan. 23 while the third case was admitted on Jan. 19 and discharged on Jan. 24.

The spokesman said the situation was under control.

Victims In Same Family

Kuala Belait BORNEO BULLETIN in English 2 Feb 80 p 40

[Excerpt]

KUCHING. — The Sarawak Medical Department, already troubled by the continuing diarrhoea epidemic, now has an added problem — cholera.

The first two cases of the disease for about a year were confirmed in the Kuching District last week.

Taken 31-year-old member of the same family in Jalan Mungah, off Jalan Merdeka, Kuching.

First was a four-year-old child, followed a few days later by her 57-year-old grandfather, with both victims admitted to the Sarawak General Hospital for treatment.

BRIEFS

GASTROENTERITIS CASES INCREASING—Janakpurdham, April 15. The number of gastroenteritis and dysentery patients reporting to the zonal hospital has increased following the rise in temperature, reports RSS. A total of 50 patients reported to the hospital in the past one week, it is learnt. Altogether 2897 of the 44 thousand patients were provided treatment in the indoor ward of the hospital in the past 11 months, it is stated. Those undergoing treatment are stated to have been suffering from gastroenteritis, leprosy and tuberculosis. Besides, 174 patients bitten by mad dogs were also provided treatment. Meanwhile, in absence of necessary medicines in the hospital 532 lepers receiving treatment regularly have not been able to receive the treatment since the last five months. Among these lepers 398 are old and 134 new cases. The work has been further affected by the X-ray plant which has been out of order for the past two years. Besides the hospital faces problems of accommodation and shortage of technicians and medical equipment. [Text] [Kathmandu THE RISING NEPAL in English 16 Apr 80 p 3]

MALARIA CASES IN KARNALI--Chinasim, April 19--Cases of malaria have been encountered recently in some places of Karnali zone, it is learnt from the extended vaccination project district office at Jumla, reports RSS. Concerned quarters feel the need for providing the employees of the extended vaccination project district office with medicines and slides and for giving them technical knowledge and training about malaria control, it is stated. With no activity relating to vaccination visible at the project district office, it is being widely alleged here that the employees come to the office every day only to sign the register and take their pay. [Text] [Kathmandu THE RISING NEPAL in English 20 Apr 80 p 4]

CSO: 5400

DENGUE FEVER EPIDEMIC ON NIUE ISLAND DECLARED OVER

Wellington THE EVENING POST in English 15 Apr 80 p 28

[Text] The New Zealand medical team sent to Niue Island to help with the dengue fever epidemic is back home. Almost half the 3500 people on the island had the disease.

Three people died in the epidemic and about 600 people were treated for the disease. But a survey showed that up to 50 percent more of the population had shown symptoms.

The New Zealand team of two doctors and two staff nurses from Auckland Hospital returned to New Zealand on Good Friday.

The team's leader (Dr Rod Ellis-Pegler) told the "Post" there had been a dramatic improvement by the time they left. He said this was largely due to a mosquito eradication campaign run by the World Health Organisation.

Dengue, sometimes known as breakbone disease because of the severe rheumatic pains that go with it, is carried by a mosquito. It cannot be transmitted directly from person to person.

Dr Ellis-Pegler said the mosquito can survive in small patches of water, for instance, in an old tin can.

Local people cut their grass and picked out all the old cans and bottles. They put oil on their water tanks to get rid of the larval stages.

"What they have to hope now is that they totally got rid of it."

Dr Ellis-Pegler said that at first the team was treating 60 or 70 new patients a day. This was down to from nil to five a day by the time they left.

There is no special treatment for dengue and there is no immunisation against it, so the team prescribed drugs mainly to keep temperatures down and take headaches away.

No one in the New Zealand team caught the disease. "We all thoroughly expected to become we all got bitten to hell."

A spokesman for the Department of Foreign Affairs said the department has now been officially advised from Niue that the epidemic is over.

In the second week in March more than 50 percent of the students were absent from some schools and some Government departments were down by one third. A number of teachers and pupils are still affected.

The spokesman said that as well as the anti-mosquito campaign the strong winds brought by Cyclone Tia probably helped against the epidemic. Also, so many people were affected that most were now immune to that particular strain of dengue — although there are others.

The efforts of the New Zealand team, which took 300 kilograms of medical supplies, did not go unappreciated on the small island.

"They were really quite incredible, overwhelming really. We were entertained in a very lavish local way and given enormous numbers of gifts and we had not done anything anyone else wouldn't have done," Dr Ellis-Pegler said.

GOVERNMENT AMENDS CHILDHOOD IMMUNIZATION SCHEDULE

Wellington THE EVENING POST in English 18 Apr 80 p 7

[Text]

The Health Department has made some changes to its immunization schedule to make sure protection against disease is the best possible.

A polio booster at five years old has been added. This should be done by the child's own doctor, but if this is not possible the booster will be offered by the medical officer of health when the child starts school.

The tetanus booster at five years is no longer necessary if the child had its infant injections against the disease and was given a booster at 18 months.

Complacent

Announcing the changes, the deputy director of public health (Dr Campbell Bogg) said it

was more important than ever for children and adults to receive the recommended immunizations. The changes did not mean people should become complacent.

The recommended immunization schedule is now:—

Three months: triple vaccine (diphtheria, whooping cough and tetanus) and poliomyelitis.

Five months: triple vaccine and poliomyelitis.

Twelve months: measles.

Eighteen months: double vaccine (diphtheria and tetanus) and poliomyelitis.

Five years: poliomyelitis, double vaccine if missed at 18 months.

Eleven years: rubella (girls only).

Fifteen years: tetanus.

C50: 5400

HEALTH MINISTER DISCUSSES MALARIA IN COUNTRY

Managua LA PRENSA in Spanish 18 Mar 80 pp 1, 12

[Text] The high incidence of malaria suffered by our people due to neglect by the Somoza regime will decrease by over 50 percent as a result of the work being done on that problem by brigade members working on the literacy campaign throughout the country.

That is the opinion of four experts--the best in the world--sent by the WHO and the Pan American Health Organization with the sole purpose of advising our revolutionary government in developing and implementing a plan to be carried out by literacy brigade members on that specific subject, which, as in other areas, is considered a byproduct of the great campaign against ignorance.

During an interview yesterday, Minister of Health Comrade Cesar Amador Kulh said that at the present time the Pacific area has the highest incidence of malaria, mainly in Chinandega, Leon, Carazo, Managua, and Granada, where the percentage of positive tests varies between 15 and 28 percent, but there are places where the incidence reaches 50 percent.

He added that the brigade members' job in the matter is to find out every day if there are persons running a temperature in the communities where they are working.

When they find people with fever, or in the areas where there is the highest incidence of the disease, the brigade members will give a continuous treatment for a period of 5 days, to children, adults and the elderly alike.

The young brigade members in the areas where there is less malaria will take blood samples from the people--with a prick on the finger--and will give them a single dose of medicine to prevent malaria. After about 3 weeks they will receive the test results on the sample, and if they are positive, they will give the 5-day treatment. According to the official, the brigade members will do that work in all the urban and rural areas of the republic.

When necessary, they will have the logistical assistance of the Ministry, which will conduct sprayings, drainage operations, laboratory tests, and so forth.

In order to accomplish this, health department heads have been instructed to be in close contact with the heads of literacy squads and brigades, not only to handle urgent cases in general, but to give all necessary help they can in that respect.

The brigade members will also use the campaign's communication network to consult with the urban centers or to report serious health cases that may occur in the communities where they are working. They will also have a first aid post that will be managed by the leader of each squad.

The young brigade members have been trained for all this work, and with their work it is expected that the incidence of malaria will decrease by 50 percent throughout the country.

Comrade Amador said that to prepare and carry out this program, the revolutionary government obtained \$2 million from the UN Development Program, funds which will be used to continue work toward the complete eradication of malaria even after the literacy campaign is over.

For this, and for greater effectiveness in the campaign to wipe out malaria, the Ministry of Health will obtain transportation equipment like motorcycles, bicycles and cars which will be used in inspection and followup work.

It was also reported that at this point all the thousands of brigade members have been immunized against tetanus, and will be supplied with chlorine to purify water, with the means to treat mountain leprosy, with first aid equipment, with instruction pamphlets on health, and so forth.

As of this date, the Health Ministry is already well along in the training of 11,000 workers who in turn will train the 175,000 brigade members in the treatment and control of malaria. The brigade members will have a special workbook prepared by the Health Ministry for the purpose.

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CSO: 5400

BRIEFS

MALARIA CAMPAIGN--The Central Laboratory of the Ministry of Health finds 90 positive cases of malaria per month out of every thousand blood samples taken in the Malaria Eradication Area. The majority of those coming to that laboratory are from districts like Santa Clara, Villa Pedro Joaquin Chamorro, Loma Linda, Las Brisas, San Judas, Horizonte Norte. Previously, 600 people came every month; now the number has risen to 60 a day, equivalent to 1800 a month. In positive cases in adults over 15 years of age, they are given radical treatment using chloroquine for adults--3 tablets daily for 3 days--and primaquine for children--1 tablet a day for 14 days. [Text] [Managua BARRICADA in Spanish 2 Mar 80 pp 1, 12] 8587

CSO: 5400

WORST FORM OF TB AT REFUGEE CAMPS

Lahore THE PAKISTAN TIMES in English 20 Apr 80 p 3

[Text]

The worst form of tuberculosis, the galloping type T.B. which spreads like wild fire among the human beings is prevalent at Afghan Refugee Camps, according to a survey conducted by the doctors working at these camps.

Disclosing this to newsmen on Saturday Dr A H Saeed Secretary of Chest Specialists Panel of National Tuberculosis Association of Pakistan and Dr S Amjad Riaz Shah, secretary, Punjab T.B. association said that the malnutrition unhygienic conditions and environments with which the refugees usually are starved were responsible factors for the spread of this disease. The communicable disease he said posed a great threat to our population.

Dr Saeed said it was the second time that Pakistan was facing the great threat of tuberculosis. The first being in 1947 at the time of Independence when a large number of T.B. affected refugees from occupied Jammu & Kashmir and East Punjab crossed into Pakistan.

Pakistan, he said, was listed as the second highest T.B. ridden country in the world. The incidence, however decreased from five to two per cent during the past 30 years

through various efforts. He cautioned that if proper and timely measures to check the disease among Afghan refugees were not taken incidence of disease would again rise.

Dr. A. H. Saeed said the Government of NWFP was aware of this alarming situation and it had asked certain questions from the T.B. Association to control the disease. The President of National T.B. Association Begum Zari Sarfraz referred these enquiries to the Specialist Panel which met in Lahore on Friday. It has suggested that Mass Miniature Radiotherapy for case finding and a process laboratory for quick disbursement of T.B. cases should be established at Peshawar. The Associations volunteer doctors would examine and treat the patients.

Dr A. H. Saeed said that he will raise the issue at the forum of International Union against Tuberculosis (IAUT) at its next meeting at Prague in July next.

The Chest Specialists, Panel also viewed with concern the increasing incidence of cancer among our population and said that the new industries should be established at distant places to minimise air pollution.

PAKISTAN

BRIEFS

SUBSTANDARD ATTA CAUSES GASTROENTERITIS--Bannu, Malik Amir Nawaz Khan a prominent social worker of Bannu requested the concerned authorities to improve the quality of Atta, being supplied to the residents of Bannu at ration depots. The inhabitants of Miranshah in North Waziristan recently refused to accept the substandard quality of atta and returned the loaded trucks of atta. He said if the quality of atta could not be improved, the Government should supply wheat instead. He said the bad quality atta resulted in cases of gastroenteritis and other epidemic diseases. [Excerpt] [Islamabad THE MUSLIM in English 17 Apr 80 p 6]

CSO: 5400

SNAIL FEVER CONTROL STILL A LONG WAY OFF

Manila PHILIPPINES DAILY EXPRESS in English 26 Mar 80 p 3

[Article by Paul Icamina]

[Text] Peking ducks haven't been much of a success. Neither are poisonous plants, although fish might be one answer.

Although they haven't given up yet on biological controls, researchers as they have done for years--are more and more convinced that synthetic drugs might be the answer, although one doctor is looking into the effects of birth control pills on victims.

The victims are some 620,000 Filipinos, almost all rural folks, who have been found to have schistosomiasis (snail fever) last year. Although rarely fatal (two deaths per 100 cases if untreated, 1.78 percent if treated), the sheer size of people affected, the high global prevalence and the complicated transmission route put a heavy burden on limited health budgets.

In the Philippines alone, some 3.9 million people in 129 endemic towns are exposed to the disease. Costs of existing control programs, already few considering the people at risk, fall in the range of 40 U.S. cents to \$12 per person. A recent estimate places the world's population exposed to snail fever at more than 590 million.

In Leyte, there are 83,000 confirmed cases, with Samar having a little bit more. About 25 percent of schistosomiasis (or sisto, for short) cases in the archipelago are found in both areas.

No wonder then that the country's Schistosomiasis Control and Research Project (SCRIP) is based in the coastal town of Iloilo, Leyte.

American soldiers with General MacArthur's invasion force in 1945 could not resist swimming in the cool rivers habitats of sisto-carrying snails. Those who survived the war later succumbed to the disease, prompting the American government to initiate research.

Today, Dr Bayani L. Bals, SCRP deputy director, is still in it. "Praziquan-
tel seems most encouraging," he says, able to reduce over 95 percent of
sisto eggs from an infected person in six months' time. The cure rate
averages 82 percent (against 50 percent in the previous drug of choice), with
no deaths so far in about 1,334 patients tested. No nausea, vomiting and
abdominal pains--common side effects in other drugs--were observed.

Besides sisto drugs available to date have been too toxic for mass applica-
tion, Praziquan-
tel has to be tested on not less than 10,000 patients before
certified safe for use all over the country.

The SCRP has tried Peking ducks in two experimental sites with little suc-
cess because they eat snails--as small as a grain of rice--only by chance.
Fish are potential controls because they eat the snails and the sisto worms
they carry cannot develop inside fish.

Field trials have been made with tuba (*C. tigilium*) seeds, pulverized and
sprayed as molluscicides in infected areas. A traditional fish poison
banned by fisheries authorities, it is so toxic that it has one drawback--it
can cause skin cancer, although effective at about eight grams per square
meter.

A traditional hair shampoo made from gogo bark is not practical since about
100 grams per square meter is needed to be effective. About 10 more plants,
including the betel nut and other poisonous ones, are also being eyed as
possible molluscicides.

Synthetic chemicals are also prohibitive in cost. One brand costs P400 a
kilo and one gram is needed per square meter for it to be effective.

The University of Chicago has come up with a potential vaccine produced
from the Formosa strain of sisto worm flukes which affects only animals.
A proposal to immunize prisoners of the Davao Penal Colony was turned down
by the National Research Council because it was too dangerous and needed
prior extensive safety study in animals (present drugs tested on humans
have undergone animal safety tests).

Meanwhile, Dr Francisco S. Sy of the University of the Philippines Insti-
tute of Public Health is looking into the effects of birth control pills
on sisto-infected women. Some studies abroad have shown that prolonged
pill-taking causes some harm to the liver, while one species of sisto worm,
Schistosoma japonicum, found only in East Asia, causes the most serious liver
damage.

"The government is pushing the family planning program, giving pills left
and right, without first examining whether recipients have schistosomiasis,"
said Dr Sy. "Theoretically, it might be adding insult to injury."

While a similar study is being made in Egypt, Dr Sy's World Health Organiza-
tion-sponsored research will not be finished before September this year and
it is still too early to tell whether there is indeed insult added to injury.

Water plays a significant role in the transmission of snail fever, first contaminated by infected people. A combination of slow-running water, adequate vegetation, suitable temperature and organic food material favor the water snails which transmit the disease, and man contracts the infection through water contact.

Because it is mainly a rural disease associated with low standards of living, farming and fishing, a five-year government project in Leyte started in 1978 is planned to improve 150 kilometers of existing drainage and natural creeks, construction of 60 km of main drainage and 240 km of secondary drains in 20,000 hectares of infected areas.

Irrigation per se spreads sisto (as in Egypt) so the National Irrigation System Improvement Project here has a sisto control component attached to it. The project covers 20 towns where irrigation canals will be provided with drainage, snail traps, etc. Communities are also being involved especially in health education, environmental protection, case finding, and treatment.

The five-year project will also see the construction of 800 footbridges, 5,000 jetmatic pumps for household wells, 15,000 water-sealed toilets, a screening campaign in all grade schools, and drug treatment of 60,000 cases.

But sisto is no ordinary disease, involving a complex web of transmission route and complicated by other social and economic factors.

In man, adult worms settle in the blood vessels of various internal organs where they may live for 20-30 years. Thousands of eggs may be laid each day by female worms and most remain trapped in tissues but, to continue the cycle, some eggs must reach fresh water by escaping through intestinal walls, feces or urine. Depthnews Science Service

CSO: 5400

ACTIVITIES OF PORT SANITARY-EPIDEMIOLOGICAL SERVICE NOTED

Gdansk HORYZONT in Polish No 2, Feb 80 pp 28-31

[Article by Krzysztof W. Debicki: "The White Cordon"]

[Excerpts] Naturally, the great epidemics did not by-pass Poland either. In ancient times and also in the early Middle Ages little was done to avoid contagious diseases and especially to stem their deadly progress; now along with the development of navigation efforts were launched to put an effective stop to the germs which can travel from distant lands.

Before World War I, port doctors existed practically everywhere. In Poland, the Port Health Service was established in Gdynia in the inter-war years and became an exemplary post shortly thereafter, yielding in nothing to a similar one operating in neighboring Gdansk.

The cornerstone of the organized health and epidemiological service in People's Poland was, in principle, the decree of the Council of State dated 14 August 1954 on establishing the State Health Inspection (PIS), from which, on the basis of the authority in that same document, the separate State Port Health Inspection (PPIS) was formed and had as its task the assumption of all PIS activities in the areas of the ports, harbors, and inland waters as well as the effective prevention of contagious diseases from being brought into Poland.

In connection with the signing of the International Health Regulations by Poland in 1971 and receiving by virtue of that the Epidemiological Bulletin issued every week in Geneva--which discusses the current epidemiological situation in the entire world--the protection of our borders became considerably easier than before.

Dr Boguslaw Kotowicz, who has been the director of the Port Sanitary-Epidemiological Station in Gdansk since 1954, stated: "Every day, via the Maritime Agency, we receive precise lists of ships which are expected in port along with a description of their cargo and the last port of exit. Knowing, on the other hand, from the Geneva bulletins, what we can expect and from which vessel, we issue a decision on releasing the vessel from

quarantine admission or we classify it for such an admission. Recently, for example, on 20 December 1979 we detained on the roadstead a Polish flag ship, the 'Kopalnia Moszczenica,' which was sailing with a cargo of phosphorites from the port of Kpeme in Togo. We were forced to take this step in view of the information from the World Health Organization, noting that numerous cholera cases were registered in that region..."

As can be seen from that, the authority of the port doctor is almost unlimited if there exists the smallest suspicion of an epidemiological danger.

The doctors employed at the station, of course, discharge their duties over an entire 24-hour period because the necessity for making an admission is always connected with a delay of the ship in entering the port, thus frequently subjecting the shipowner to considerable losses.

"Within the framework of the quarantine admission we do a detailed documents check, namely, of a deratization certificate which has a 6-month validity as well as of the certificates of inoculation of the crew against cholera, smallpox and yellow fever. Only when we have confirmed beyond all doubt that all the documents are in order and the crew does not exhibit any symptoms of disease, and also an inspection of the ship does not result in any cause for reservation, does the vessel receive the so-called 'Right to freedom of movement.' It is worthwhile to add that this entire complicated procedure can be avoided if the captain sends a 'ZS' quarantine message from the sea in the case when his vessel is healthy. Then, using this same international code, we send him a 'ZY' reply, which means that we are releasing him from the [quarantine] admission and are granting him 'Free Pratique'... Such a system of communication saves both sides unnecessary work and, above all, time," concludes, after a moment of thought, Dr Kotowicz, who, just as a majority of the doctors, turns out to be an excellent story-teller who is able to quite artistically describe the splendors and miseries of his, and for the entire country's as well, important professional mission.

While on radio duty over New Year's once, the director of the station received an unexpected message from the Liberian freighter "Natale," which was on the roadstead, in which the captain, a Greek, requested permission to send a very ill sailor ashore described as "full crazy." After going by pilot boat to the ship's side, Dr Kotowicz confirmed that the patient was in a state of severe alcoholic poisoning and was so expertly "wrapped" that it was possible to transfer him to the motor boat without any difficulty and transport him to the nearest hospital in order to render assistance.

Another time, 2 years ago, also on New Year's Eve, a ship from India radioed from the roadstead that it was carrying a person with smallpox on board. Of course, the ship was immediately placed in quarantine. After 4 days, it turned out, however, that this was an unusually severe case of chickenpox.

Unfortunately, not all notifications of a similar nature end so innocently.

The case with another ship of the Indian flag, namely the "Indian Resolfe," which came to Gdynia in 1963 was much more ominous. Because the captain did not send, in accordance with good practice, a quarantine telegram, Dr Kotowicz decided to carry out the quarantine clearance on the vessel.

"I began with an inspection of the appropriate documents," the station director recalled after nearly 17 years, adding that there was not much longer to go before he would bid farewell to his job, not to mention other, difficult-to-foresee consequences, had he not exercised the proper vigilance then. "Not finding anything suspicious in the papers, I asked the captain if he had anyone ill on board, to which he answered with stoic calmness that several days ago one of the members of the crew began showing indications of smallpox, but the doctor who examined him in Hamburg declared that this was a completely non-threatening chickenpox and it was not necessary to be overly concerned. Though I did not have reasons," added my interlocutor, "not to trust the German colleague, I decided to take a look at the sick person. He also gave me cause for suspicion at the first glance. However, since, in addition, he did not have a valid inoculation certificate, I detained the ship as a precaution and sent the sailor to our quarantine hospital. Soon there were 70 persons there from the crew as well as several hundred people who had contact with the sailor. The smallpox turned out to be quite authentic..."

The disease which was localized in a timely manner did not filter into the town and did not result in any fatalities. However, it is better not to mention what could have been the results of overlooking the threat. That is why one should not be surprised when the employees of the Port Sanitary-Epidemiological Station wish sometimes to be overzealous rather than permit the smallest possible oversight. Especially, since cholera has appeared for some time in many regions of Asia, Africa and even Europe. Indeed, its present variety, carrying the resonant name El Tor, is characterized by a weaker course but of considerably longer duration, often up to 10 years.

Protecting the borders of the country against the persistent and still-threatening diseases, the port sanitary-epidemiological stations check everything that is shipped to Poland via the ocean route. Irrespective of this, they also inspect port warehouses, domestic means of transport, food supplied to the ships, and the health certificates of the sailors. They also carry out preventive inoculations of all persons going abroad and also of foreign sailors at the requests of the shipowners.

If, on the other hand, the regular imparting of quarantine opinions and radio medical guidance is added, it will become evident that the enormity of work and responsibility which rests on them is truly impressive.

If--and here one should knock on wood--we enjoy good health and know about many diseases only from hearsay, we should remember that we owe this to the people who created a thick white cordon around us and who watch that nothing filters through it, not even one death-threatening germ or virus.

CSO: 5400

TANZANIA

BRIEFS

CHOLERA IN MBOZI DISTRICT--Nine persons have died of cholera and 55 others have been admitted to hospitals following an outbreak of the disease in three villages in Mbozi District of Mbeya region last Saturday. The Mbozi District development director, Ndugu (Mwakangila), said today that the district has established emergency treatment centers in the affected villages in an effort to contain the outbreak. The villages in question are (Mkala), where 7 persons died and 37 others are under treatment; Katete, where 1 person died and 12 others are under treatment; and (Msangano), where 1 person died and 6 others are under treatment. Ndugu (Mwakangila) said all the areas affected by the disease had been placed under quarantine and the selling of fruit, local beer and roast meat had been banned throughout the district with immediate effect. The director added that a number of doctors had been sent to the villages from Mbozi and Mbeya to treat cases and prevent the spread of the disease. [Text] [LD211844 Dar es Salaam Domestic Service in Swahili 1600 GMT 21 Apr 80]

NINE DIE OF CHOLERA--Dar E Salam, April 22: Nine people have died of cholera in three villages in southern Tanzanian and another 55 have been taken to hospital, Radio Tanzania said last night, reports AFP. The villages to the region have been quarantined. At least 69 people have died from the disease this year in the East African country. [Text] [Kathmandu THE RISING NEPAL in English 23 Apr 80 p 2]

CSO: 5400

DOCTORS NOTE INCREASE IN INCIDENCE OF TUBERCULOSIS

Istanbul HURRIYET in Turkish 13 Apr 80 p 3

[Article by Suhelyla Tascier]

[Text] Ankara (HURRIYET) -- Reporting that tuberculosis, which first appeared in Turkey in 1940 and continued its rampant spread until 1960, has reappeared and spread gradually in recent years, doctors attribute this to malnutrition stemming from the high cost of living.

Prof Dr Bahtiyar Demirag, director of the Ankara University Medical Faculty Children's Hospital Clinic, reported that the number of tubercular children undergoing treatment at the hospitals in the capital is gradually increasing and said that more than 50 tubercular children are brought to the hospital for treatment every day.

Most of the children come from the heart of Anatolia, the Black Sea, eastern Anatolia and the southeast, according to Professor Demirag who gave the following information:

Economic Conditions

"The major cause of the spread of the disease is malnutrition caused by economic conditions. A woman who does not receive adequate nutrition during pregnancy cannot nourish her fetus. After the baby is born, it does not receive adequate, steady nutrition. The malnourished infant cannot fight bacteria. The tuberculosis bacteria attack the lungs and little by little destroys the child's health. If the mother is slow in noting the condition, the disease spreads further and reaches the brain. The type of tuberculosis seen most often in Turkey is tubercular meningitis, that is, tuberculosis of the brain. There is no cure for this type."

Immediate Infant Inoculation Necessary

Noting that infants should receive the BCG inoculation as soon as they are born and that meticulous care is required, Professor Demirag said the babies should not be taken from the maternity clinics or hospitals before receiving the inoculation.

Professor Demirag said that the symptoms of the disease are lack of appetite, high fever for no known reason and coughing, which mothers take to be a simple cold, and as a result of neglect and ignorance, the disease is allowed to progress. He added:

"The mother thinks the child has caught a cold or bronchitis and tries to treat him with the remedies known to her. She is not aware of the slow progression of the disease. A feverish child must be taken to the doctor immediately. And attention must be given to the balanced nutrition of children."

100 Percent Rise

Assistant Professor Dr Sukru Cin, a doctor on the Ankara University Medical Faculty, reported that the disease had reappeared in Turkey in 1978 and had not been given the necessary attention. He said:

"The subject was taken up in all the congresses, but for some reason the ministry has concealed it from the public. Tuberculosis increased at a rate of 50 percent in 1978 and has reached 100 percent in recent months. The disease is most widespread among infants and children in the 0 to 3- and 0 to 10-year age groups. If preventive measures are not taken and a BCG campaign reinstituted, the disease will spread to adults and nothing can be done. Turkey will again be riddled with tuberculosis as it was in the 1940's and 1950's."

8349

CSO: 5400

SRV HEALTH OFFICIALS INTERVIEWED ON DISEASE, MALNUTRITION

OW030109 Hong Kong AFP in English 0001 GMT 3 May 80

[Report on interview with Dr Nguyen Ngoc Ha, deputy director of the local health service by Jean Pierre Gallois]

[Text] Ho Chi Minh City, May 2 (AFP)--Infectious diseases and a general state of malnutrition, especially among children, are rife in this South Vietnamese city and the cause of major concern for the local health authorities.

"We are sitting on a volcano," the deputy director of the local health service, Dr Nguyen Ngoc Ha told AFP. He returned to Vietnam in 1975 after practising in France for 13 years.

He said an epidemic could break out in Ho Chi Minh City's crowded suburbs if a close check on the situation was not maintained.

In order of importance, he listed the following diseases as endemic: Malaria, tuberculosis, dengue fever, meningitis, diphtheria, tetanus, polio, cholera, the plague and leprosy.

Since 1975 important progress had been made. At the time about 6 percent of the city's three million people had tuberculosis. Although the population had increased in the meantime, Dr. Ha said only slightly more than 70,000 people now had the disease. The 20 percent incidence of malaria had been reduced to 7 percent in the areas worst affected.

Dr Ha said the cholera situation on the other hand was "worrying". While no cholera was reported in the city in 1978 and 1979, several isolated cases were discovered in the first months of this year.

"It also appears that a cholera zone has been localised in the Mekong River delta, but reports on this are still fragmentary. Although one should not dramatise, it is cause for alarm. The beneficiary measures we have undertaken these past five years in prevention must not be lost. "People must remain aware of this and continue to have themselves vaccinated even though the dangers might not appear imminent to them," he said.

Ho Chi Minh City has 1,000 doctors and 10,000 hospital beds. Although the medical authorities consider this insufficient, they feel the health situation can only be tackled through the battle against malnutrition.

Considering that the Vietnamese adult is generally underfed, this problem is particularly serious among children.

One could assume that all the children in the city's urban zone were suffering from malnutrition taking into account the fact that half its 2,300,000 people were children aged 15 years and less, according to Mrs Duong Quynh Hoa, former health minister of the provisional revolutionary government of South Vietnam who has been conducting research on the nutrition situation.

She said a survey conducted at Ho Chi Minh City's main creche this year showed that over 40 percent of the children there suffered from malnutrition.

"Bearing in mind that most of them are the children of cadres, in other words of those more privileged, it can be assumed that there is a 100 percent malnutrition rate among the children of those in lesser positions among the urban community," Mrs Duong said.

The situation among the one million people in the city's rural areas was better and it appeared that there was only a 30 percent malnutrition rate among children in the rural districts.

The root cause of the problem was mainly economic. The state did not provide sufficient foodstuffs such as milk, but families did not earn enough to make up for what was not provided on the free market.

"Another cause of the problem I would describe as cultural. Bad eating habits combined with a scarcity have resulted in serious unbalance. Children are stuffed with starchy food but they don't get enough fats. Only a quarter of them get meat regularly. On the whole, the luckiest ones only get two-thirds of the necessary calories.

"The result of this is infectious disease," she said. Mrs Duong said the rate of lung-related diseases for example had (?doubled) compared to last year.

CSO: 3400

BRIEFS

GUATEMALA-EL SALVADOR BORDER QUARANTINE--Stringent quarantine measures have been implemented once again in the El Salvador border region to prevent the spread to Guatemala of equine encephalomyelitis of the Venezuelan type, PRENSA LIBRE was told yesterday by Dr Francisco Bobadilla Palomo, director of the DIGESEPE. The official pointed out that this equine disease has caused problems in the neighboring country and that although Guatemala has already recorded several cases, it is necessary to prevent these from increasing for lack of attention at the Salvadoran border. Bobadilla Palomo said that the incidence of equine encephalomyelitis in that country was 30 percent; however, as the result of special programs by the Ministry of Agriculture, the disease has abated considerably to the point of near extinction. "For this reason," he emphasized, "we must step up surveillance at the El Salvador border, particularly as regards the cordon sanitaire and prevent the encephalomyelitis from spreading to the cattle fields of Guatemala." This cordon sanitaire will be set up from the border to a point 5 km into the country. [Text] [Guatemala City PRENSA LIBRE in Spanish 25 Mar 80 p 2] 8143

CSO: 5400

FOOT-AND-MOUTH DISEASE NOT EPIDEMIC THREAT IN RIO

Rio de Janeiro O GLOBO in Portuguese 26 Mar 80 p 9

[Text] The Study Group to Combat Foot-and-Mouth Disease (GECOPA) made it clear yesterday that there is no imminent threat of an epidemic of that disease due to the lack of vaccines in the northern part of the state of Rio de Janeiro, in particular Campos. GECOPA technicians said that the danger of a spread of the disease is not limited only to a vaccine shortage, since the causes of contamination range from poor sanitary conditions in corral yards to the negligent introduction of sick animals into healthy herds.

The temporary lack of vaccines will be offset by the massive vaccination campaign to be launched in June, according to the GECOPA, which further explained that there is no danger of a delay in the scheduled beginning of the campaign.

Where the shortage of the product on the local market is concerned, the technicians made it clear that the Ministry of Agriculture has been strictly supervising the production of vaccines by the various laboratories, and a number of shipments were destroyed because they were found defective.

"It is preferable to have less vaccine of good quality than to have a great deal of doubtful quality. The laboratories reduced their production because of the strict quality controls, but all will be normal by June," one of the GECOPA technicians said.

Another explanation for the temporary shortage of vaccine is the fact that this is not a vaccination month. Because it is out of season, marketing of the product is avoided because the merchants would have to store it, running the risk of a weakening or deterioration in the product.

5157

CSO: 5400

BRAZIL

BRIEFS

FOOT-AND-MOUTH DISEASE--(Flor Amaral), chairman of the (Farsul) [not further identified], has reported outbreaks of foot-and-mouth disease in southern Rio Grande do Sul State, specifically in the municipalities of Pedro Osorio, Arroyo Grande, Santa Vitoria and Eryal. [PY292300 Porto Alegre Radio Gaucha in Portuguese 1545 GMT 29 Apr 80 PY]

CSO: 5400

FURTHER AFRICAN SWINE FEVER CONTROL MEASURES ADOPTED

Havana GRANMA in Spanish 20 Mar 80 p 3

[Article by Angel Sanchez Contreras]

[Text] Bayamo--Organizations charged by the government leadership with responsibility for adopting preventive measures against African swine fever which has penetrated Guantanamo decided to implement a system for the inspection of baggage so that only one inspection will be required and not at every sanitation control point, to prevent delays in the itineraries of national buses and trains.

The system will also be extended to postal packages handled by the Ministries of Communications and Transportation. Control measures will be applied under the technical guidance of the National Institute of Veterinary Medicine and carried out by Civil Defense, with a view to preventing the movement of pork or its derivatives, which are potential carriers of the African swine fever virus, from one territory to another.

During a meeting held in Bayamo, which was attended by specialists in Veterinary Medicine from the five eastern provinces and Camaguey, it was once again stated that there is a need to rigorously maintain measures for the control and prevention of swine fever to prevent an upsurge in new foci.

As is known, the outbreak of this epidemic among swine herds occurred this year in Guantanamo Province. This is the second outbreak of this kind in the country, as a similar outbreak took place in Havana Province in 1971. To ensure the development of pork as the principal source of meat for the population, along with beef, many emergency measures were adopted in the eastern region of the country. Although new foci have not developed in the national territory, the need for maintaining the above-mentioned control and prevention measures was reiterated.

8143

CSO: 5400

BRIEFS

CATTLE DEATHS--Madras, March 27. Animal Science experts have ruled out the possibility of IBR virus (Infectious Bovine Rhinotracheitis) in the death of prize cattle of the Jersey Farm, Uthagamandalam as identified earlier. The scientists have confirmed rinderpest virus as the cause for the killing of the exotic animals, said a spokesman of the Tamil Nadu Dairy Development Corporation (TNDDC). The spokesman said though the farm animals were periodically immunised against this deadly virus, they succumbed due to breakdown of immunity, which was a common phenomenon in pure bred exotic animals at higher altitudes. While exotic cattle fell readily for this disease, the local breeds had developed a resistance. Therefore only the Jersey farm was affected while the farms in the neighbourhood did not suffer, he added. Tamil Nadu still remained free from the most dangerous IBR virus. The analysis of the cattle feed showed that they were good and any danger level of Aflatoxin (a poison produced by a storage fungus *Aspergillus flavus*) was negatived. Nearly 3,000 cooperatives and 20,000 farmers besides the State Animal Husbandry department use the TNDDC feed and there were not a single complaint on the quality of the feed, he said. All the district Livestock farms of the Animal Husbandry department continue to buy feed from TNDDC, according to him. [Text]
[Madras THE HINDU in English 28 Mar 80 p 9]

CSO: 5400

ANTIRABIES CAMPAIGN ORDERED FOR DOGS

Blantyre City

Blantyre DAILY TIMES in English 8 Apr 80 p 5

[Excerpt] Blantyre, Monday--A rabies tie-up order is in force in the City of Blantyre from today, April 8, to May 16, 1980.

A press release from the Regional Veterinary Office here said that all dog owners should take note of the order during this period stated above.

The places and dates where and when the order will be enforced are Chilobwe, Chimwankhunda and Zingwangwa from today, April 8 to April 10; Nkolokosa, Naperi, Chitawira and Soche from 11 to April 12; Chinyonga, Kanjedza and the whole of Limbe area from 14 to April 16.

Chigumula and Newlands, 17 to April 18; Bangwe and Mpingwe 21 to April 22; Ndirande, Mudi and Chichiri 23 to April 24; Chirimba, Nyambadwe, Mbayani and Machinjiri 24 to April 26.

Chilomoni, Blantyre City Centre, Kabula Hill, Namiwawa and Dharap from 28 to April 30; Sunny Side, Mount Pleasant, Mandala, Nancholi and Manyowe, from 1 to May 3; Lunzu Trading Centre, 5 miles radius from the stores from 5 to May 15.

Chileka Veterinary Station, 5 miles radius from the station, from May 5 to May 15 and Lirangwe Trading Centre, 3 miles radius from the stores, from 5 to May 15, 1980.

The announcement stated that all dogs must be chained for 24 hours each day during the dates mentioned in various areas adding that any dog found roaming about will be shot dead after blowing the whistle twice to warn the public.

Free anti-rabies vaccination will be given to all dogs which were missed during the last tie-up in December, the release added.

Mzuzu Township

Blantyre DAILY TIMES in English 10 Apr 80 p 5

[Text]

MZUZU
Wednesday

ALL stray dogs within and around Mzuzu Township will be shot from April 14 to 18, a spokesman from the Regional Veterinary Office here announced yesterday.

In his circular letter addressed to all heads of departments, chiefs and residents of the township, the official said that due to increased cases of dog bites in the township and lack of care by owners a dog-tie-up order will be enforced during this period.

He said this has been done

in an attempt to reduce the number of or eradicate stray dogs which wander uncontrolled in the township.

During the tie-up order, he said, all dogs which are more than one month old must be kept under strict control.

During the tie-up order dogs should be vaccinated and receive a certificate and a licence. "Any dog found without these will be shot," the spokesman warned.

A tie-up order was last conducted in the township in November last year. —
MANA

CSO: 5400

BRIEFS

ANIMAL DISEASES IN KAILALI--Dbangadhi, April 18--Black quarter and other animal diseases have claimed 30 cattle heads in five village panchayats of Kailali district, reports RSS. According to veterinary hospital, two teams were already sent to the villages. The affected panchayats are Sugurkhal, Balia, Dharmapur, Basauti, Tikapur and Bauniya. In absence of medicines in the local veterinary hospital here, they are to be purchased from India, it is learnt. [Text] [Kathmandu THE RISING NEPAL in English 19 Apr 80 p 3]

CSO: 5400

AGENCY ASKS NEW RABIES, EPIZOITE CONTROL LAWS

Stockholm DAGENS NYHETER in Swedish 13 Mar 80 p 41

[Text] Sweden's current 10-year-old rabies control law will already be replaced by a new one this fall, provided a task force completes its emergency protection plan against rabies before then. One of the remaining question, the answer to which is yet to be found, is if all elk, deer and more rare species must be killed if one animal of a particular species is affected.

"We run the greatest risk of getting rabies into Sweden when people smuggle dogs and cats into the country," says Bengt Nordblom, adviser on veterinary matters to the Swedish Commission on Agriculture.

This smuggling is the main reason why the task force is working up an emergency plan against rabies. The group is made up of representatives from the Commission on Agriculture, who carry the major responsibility for combating contagious diseases among animals, and the Natural Conservation Agency, the National Agency for Veterinary Medicine, the hunting associations and the University of Agriculture.

The group's report will form the basis for a new set of control laws. For the moment the group is waiting for instructions from the veterinarians as to what animals must be killed if rabies does come to Sweden.

Fatal Disease

Rabies, which can be contracted by both humans and animals, usually is fatal. The disease has not been present in this country for the last 100 years. Therefore, this group of investigators has taken an inventory of the experiences with this disease in the rest of Europe in order to learn more about it.

Reports from abroad show that practically all species, even birds and bats, can contract rabies.

"Therefore we must wait for word from the veterinarians as to whether all elk, deer and rare species have to be killed if one among them contracts rabies. We know that the fox is the primary spreader of the disease. The badger and the marten are also among the species which spread rabies quickly. This is why these species must be exterminated first in an area that has been infected by rabies," says Hans von Essen, head of the Swedish Nature Conservation Agency.

Different Methods

The struggle against rabies is fought primarily by local governments, hunting organizations and volunteers.

"We are in the process in investigating the most efficient methods of exterminating contagious animals. We have looked at traps, different kinds of poison and gas, but the disease should be combated mainly by regular hunting," says Hans von Essen.

"It's most likely that by the first of July this year Sweden will have a new epizootic control law, which will replace the old law from 1935. Epizootic means epidemic among animals. The proposed law has already been presented to the Riksdag and we are merely waiting for a decision," says Bengt Nordblom.

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CSO: 5400

GUATEMALAN-MEXICAN AGREEMENT ON COFFEE RUST

Guatemala City EL IMPARCIAL in Spanish 2 Apr 80 pp 1-2

[Text] A document called a letter of intent on bilateral work and study plans between Guatemala and Mexico was signed in Metapa, Chiapas, Mexico by the Ministry of Agriculture of Guatemala and the Secretary of Agriculture and Hydraulic Resources of Mexico.

According to Guatemalan Agriculture Minister Edgar Ponciano Castillo, "this document includes activities for exchange of information and technology related to coffee rust, in consideration of the fact that it is believed urgently necessary to implement a plan of action to prevent the introduction of the disease into the territories of Guatemala and Mexico, as well as activities inherent in its prevention and control."

He also reported that the two countries established a Guatemala-Mexico commission with headquarters in our country for the prevention and control of coffee rust which will develop and implement its work plans. It will be made up of representatives from both ministries and from the Mexican Coffee Institute and the ANACAFE [National Coffee Association] of our country.

The basic outlines of the commission's activities are as follows: exchanging information on coffee rust programs and plans and development by experts and technicians of the Coffee Plantations Commission in Guatemala of the best system for locating the disease; strengthening the system of plant quarantine in Guatemala and the installation of quarantine posts as required; as well as organizing and training small and medium-size producers and such human resources as may be needed in the process of search, detection and control of the disease.

There are also plans for developing stockpiles of materials and equipment to combat the disease in Guatemala on an urgent basis and establishing an emergency fund of 1 million quetzals, to be shared equally by both countries. This fund is to be replenished annually by the parties, to which end an appropriate agreement will be signed.

This agreement will be in force for 2 years and will be extended for an equal period if both parties agree thereto. For the government of Guatemala, the document was signed by Edgar Ponciano and for Mexico by Francisco Merino Rabage, secretary of agriculture and hydraulic resources.

BANANA, COFFEE, CACAO DISEASES REPORTED

Agriculture Minister's Statement

San Jose LA NACION in Spanish 4 Mar 80 p 4A

[Text] The banana plantations of the entire Atlantic region are free of black sigatoka, according to a statement made yesterday by Dr Hernan Fonseca Zamora, minister of Agriculture and Livestock.

He said, "I emphatically deny a comment made by a banana company, specifically the United Brands Company, which has its headquarters in the Atlantic region, to the effect that black sigatoka has reached those plantations. I did not want to mention this matter before I had the results of the respective laboratory analyses, which were negative."

In reference to the status of this disease in the San Carlos region, he said that up to now 25 million colones had been invested in the destruction of banana plantations. This money was provided by the banana companies from which an additional 10 million colones are expected. As soon as the additional funds are deposited, they will be used to destroy the 1,000 hectares remaining in that region to ensure eradication of the banana crop.

He said that a total of 2,500 hectares has been destroyed up to now. He explained that the policy in this sector has been to totally destroy plantations, as well as new shoots [repuntes] to prevent foci of sigatoka. In place of bananas, the land will be sown with cacao, yucca and coconuts. In the Sonafluca region, an agricultural settlement of the Institute of Lands and Settlement (ITCO), work will begin soon on the installation of dairy modules.

"In the meantime," Minister Fonseca said, "the quarantine stations will be maintained, especially in the strip which divides the region of San Carlos from that of Rio Frio, to prevent the movement of spores."

He reported that a communique issued by the Regional International Organization for Plant Protection and Animal Health (OIRSA) has acknowledged that black sigatoka has reached Nicaragua, where it is affecting 800 hectares of banana plantations in Chinandega Department, which is located 90 km north of Managua.

Rust

On another subject, the official said there are no indications that coffee rust exists in the country. This conclusion was derived from a sampling conducted by technicians on coffee plantations throughout the country, the results of which have been very satisfactory. He said that, thanks to the investigation, there is hope of obtaining a series of interesting data by means of a computer concerning the rust and the technology used to combat it.

Monilia

With respect to cacao monilia, he said that the campaign against this disease is intensive. However, he pointed out, there is one complication: the small grower has not responded to the recommendations of the Ministry of Agriculture. This has made the work of combatting and eradicating the disease difficult. Many cases were cited in which diseased plantations were destroyed at the request of the ministry.

Dr Fonseca announced that plantations which heeded the recommendations have an infestation level of 2-3 percent, but those which did not cooperate have a level of 40-60 percent. He said that this high percentage of disease is limited to that region, where 5,000 hectares are affected.

He said that the campaign being carried out there includes a cacao plant education and treatment plan.

Finally, the official complained of the fact that one of the adverse factors of the campaign is the lack of bank financing, which does not exist for improvement of cacao plantations. The ministry has already lodged its protest on this score with the National Banking System. It is hoped that this problem can be resolved in the next few days.

Statement Refuted

San Jose LA NACION in Spanish 5 Mar 80 p 8A

[Text] Two banana experts, who are recognized worldwide, Drs R.H. Stover and T. Woods of the United Brands Department of Tropical Research, have stated that black sigatoka has reached the plantations of the Atlantic region and emphasized that they are in a position to prove this at any time.

In this manner, they contradicted statements made by the minister of agriculture and livestock, Dr Herman Fonseca, which were published in LA NACION on Monday on page 4A to the effect that the disease is confined to banana plantations in the San Carlos region.

Scientists Stover and Woods were in the Atlantic region several weeks ago, where they gathered samples which they analyzed in laboratories abroad. The results show that sigatoka is present in the banana plantations of the Atlantic region.

The regional manager for agricultural operations of the United Brands Company, Eduardo de la Espriella, said that the company is in a position to offer Ministry of Agriculture and Livestock officials the proof gathered by the scientists.

He also invited Livestock (MAC) officials to tour the region to verify the existence of plantations damaged by sigatoka.

"It is necessary that all doubts be cleared up to avoid illusions and fatal consequences for an economy in which the export of bananas represents the second largest category in the generation of foreign exchange and one of the principal sources of employment," Espriella said.

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CSO: 5400

HOW ONE FARMER FOUGHT TOBACCO BLUE MOLD DESCRIBED

Havana JUVENTUD REBELDE in Spanish 18 Mar 80 p 6

[Text] On our visit to the [Antonio Maceo Agricultural] Cooperative, we learned of a case which, although it has not yet been the subject of study by experts, is nonetheless surprising because it is attested to by the experience of Sixto Alba, who has been harvesting tobacco for 40 years.

He managed in part to thwart tobacco blue mold. This is his story.

"Blue mold hit my field; the technician came here and ordered that all the tobacco be uprooted. I discussed the matter with him because I wanted to leave it standing to determine whether the blue mold was killing the leaves or the stalk. I left a little of it growing. Believe me, we had to use every trick in the book to keep the smudge going.

"I removed all the leaves, leaving only three or four of the small ones, high on the stalk; then, I kept the plant from flowering. I kept nipping the bud until the stalk grew strong. Next, I cut it off at ground level with my shears. What a surprise! That tobacco began to grow again entirely healthy. I have already trimmed it twice and have harvested good quality tobacco."

Alba's field and that of another peasant who conducted the same experiment with identical results are now green and healthy. The technical explanation for the reaction of the disease to this treatment is unknown; however, perhaps it can be studied, for, as Sixto says, this may be a way to fight against the mold.

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CSO: 5400

COFFEE RUST IN EASTERN REGION DISCUSSED

San Salvador EL MUNDO in Spanish 19 Mar 80 p 16

[Text] In light of what is happening at the national level, it is not too difficult to say that El Salvador is another country which is learning to coexist with coffee rust.

Historically, it has been shown that this disease is not confined to specific limits but is spread with great facility. This has been confirmed once again, inasmuch as in December 1979 coffee rust was present in our country, 3 years after it was officially reported in Carazo, Nicaragua, in November 1976.

Within the framework of the National Antitrust Action Plan, after an analysis of moderate parameters, the authorities have made a decision to coexist with the disease and to implement as soon as possible technical control over the coffee plantations.

Coffee rust was found in Salvadoran territory on 24 December 1979, and its presence was confirmed on the San Mario plantation, a 5-manzana plantation owned by Santos Lucio Sanchez, located in La Pena canton, 4 km north of the city of Santiago de Maria, in Usulután Department.

A team of technicians from the ISIC [Salvadoran Coffee Research Institute] made up of personnel from the Divisions of Technical Advice and Communications and Research immediately traveled to the affected area.

On the basis of a sampling, action was taken to define the affected region and to apply a 50-percent solution of copper oxichloride, in a solution of 3.5 kg per hectare for the outbreak originally discovered in its vicinity. The Department of Agricultural-Livestock Defense of the MAG [Ministry of Agriculture and Livestock] and the Regional International Organization for Plant Protection and Animal Health (OIRSA) established two quarantine posts located strategically on the Cuscatlan Bridge, over the Pan-American highway and on the San Marcos Lempa Bridge, on the Coastal Highway, both of which are over the Lempa River. Three other quarantine posts were established on these same highways, one at Lolotique, another at the exit from Chinameca and the last at El Transito.

After analysis of the situation and still under the control of the above-mentioned action plan, two alternatives were considered: one to eradicate and the other to coexist with the disease. Coexistence was the option selected, with the implementation of actions to retard its advance and to keep it confined to the region originally quarantined, in an area of approximately 15,000 hectares.

The area affected by rust (properties on which incidences of the disease have been detected) is made up of approximately 200 plantations in an area of 3,400 manzanas (2,380 hectares).

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COFFEE RUST ERADICATION PROGRAM DISCUSSED

Managua LA PRENSA in Spanish 5 Mar 80 p 2

[Article by Dr Camilo Vigil Tardon]

[Text] The interesting plan to eradicate rust from 14,000 manzanas of coffee in Carazo and Masaya is an intelligent effort to renovate the plantations of these departments; however, perhaps we will have to live with the fungus until after the renovation. If the fungus has already infested coffee plantations in El Salvador, it is quite probable that it also is to be found on the coffee plantations in the northern part of Nicaragua. Renovation is to be carried out with the caturra species: Bourbon coffee is an excellent variety; it has many qualities which caturra does not have; however, the latter is more resistant to drought, does not require pruning and, because of its higher density of trees per manzana, produces more coffee. But what are the limits to this density? Let those who know about such matters give the answer so that ill-advised plantings can be avoided.

Consider the sierras of Managua and part of Carazo, which are not going to disappear: Is there a synergy between the clouds of smoke from the Santiago Volcano and the propagation of rust? The clouds of smoke are said to weaken coffee trees which are then reportedly more easily victimized by the fungus. The soil of the Managua sierras, except on the floor of the canyons, is of mediocre quality, "barely suitable for the growing of coffee," I was told by a Swedish agronomist. However, be that as it may, there is stupefaction at the meager knowledge of the biochemical characteristics of this soil, compared to what is known in Europe about European soil.

The pattern of rains is actually capricious in the Pacific region, 1 year of drought interrupted by a "good winter," 6-8 months of drought in the best of cases and then torrential rains which wash away the flowers of the coffee tree and carry away the fertile soil. Coffee trees lose their leaves year after year. Yesterday, we took a look at the land in the northern part of the sierras: yellow, barren and parched land. A farm at 850 meters above sea level is a desolation of brush, cracked, parched land on sun-drenched hillsides.

Aerial photos of the sierras of Managua show a circular which drops from 900 meters to lake level in 18 kilometers. This basin is cut by thousands of channels in the shape of a fan and terminates in the lake. Immense "torrents" descend from that basin, carrying large amounts of fertile soil, the alluvial deposits of Managua, for those who spend a lot of money digging ditches and channels, without ever thinking about making it mandatory to dig drainage channels and reservoirs to retain the water and build embankments of concrete to hold back vegetation-covered land.

Many farms in this region have been mercilessly "denuded:" we can look forward in the near future to a scarcity of firewood for kitchens which keep their fires burning 24 hours a day and which prepare endless cups of coffee and hot drinks. To which we must add the well-known shortage of water in the region.

The use of fertilizers in large amounts produces no results whatever in the event of a drought; on the contrary, curiously the best-worked farms using brand new fertilizer programs of the National Bureau are those which have the greatest drops in production in the event of drought, in spite of and perhaps because of the large amounts of chemical fertilizers used. Some farms on which large amounts of fertilizers have been used have seen their production drop 90 percent in a year of drought. What happened?

The fight against rust was handled very badly: spraying with copper oxychloride was never made mandatory in the sierras of Managua; the plague began on the farms of La Flor and Las Nubes where not even 1 gram of copper oxychloride had been used. And those which did use the copper compound in large amounts saw their coffee trees damaged: the effect of the drought? Effective measures were never taken to prevent the fungus from spreading; farmers who had farms in Carazo and the sierras brought their cutters to the farms of the sierras on the day after they had cut coffee on the rust-infested coffee plantations of Carazo. Who is thumbing his nose at whom?

Those of us who have fought for many years to keep good nurseries in the Sierras know how much effort and money is needed before and after planting and to overcome the competition of the brush. Several years ago, on the farms in the north, in Somoza's time, 8-month seedlings were planted as thick as blossoms on a bough in soil which had been carefully fertilized, with the foliage sprayed with fungicides every 15 days. Of the 500,000 seedlings planted, only 100,000 survived; 80 percent did not grow and disappeared. Seedlings need spraying with good fungicides, which are very expensive.

It is very risky business to sow seedlings which have been in a nursery less than 1 year. The plastic bag should be roomy 6 x 11 inches. Then comes the costs of transportation from the nursery to the planting site: no matter how this is accomplished, by motor vehicle, animal or human being, it cannot be done if there are no roads. And there is always the chance that there will be bottlenecks to the detriment of the seedlings; many seedlings abandoned for 1 year are lost because they cannot be planted.

And what about seedlings less than 1 year old? They have been planted in full sunlight; but it seems that this does not produce good results, except on the best land.

The operation of 2,500 chainsaws requires personnel staffing of 7,500 skilled men. We have seen immense clouds of smoke at the bottom of canyons from the gasoline and oil of two-stroke motors, which are very expensive. And there are cutters who are dangerous with a chain saw in their hands.

What is needed is very careful and exact observation with useful indicators or parameters to detect in time progressive and irreversible deterioration of large coffee plantations, which can take place slowly over 25-50 years. Coffee is cultivated in the Pacific region of Nicaragua under very particular climatic conditions. And let us not forget that climatic conditions change for extended periods of time.

Renovation is an absolute necessity on coffee plantations but at what rate? Every 8 years? Every 15-20 years? And let us not forget that fluctuations in world prices of coffee are of decisive importance from the economic standpoint.

To conclude: let us hope that our peasants, turning a deaf ear to insidious counterrevolutionary advice, will take an interest in working more and better; on this depends the success or failure of the plan for the renovation of the coffee plantations of Carazo and Masaya. This will not happen if after earning a few thousand pesos during the 1979-80 harvest it occurs to them that they should rest until June, until they are hungry. A beggar was offered work cleaning a garden so that he could earn a few reales. "No, thank you, sir; I have already had lunch." That is the grandeur of the Spanish soul. However, what we need now is a real mystique of the revolution to get out of our difficulties.

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CSO: 5400

NATION URGED TO GUARD AGAINST LOCUST THREAT

Abu Dhabi EMIRATES NEWS in English 20 Apr 80 p 3

[Text]

Sharjah, April 19 (Al Khaleej): The desert locust constitutes a grave threat to anything that is green in our country. They migrate in thick swarms of thousands of millions to devour everything vegetable in their path. They gather on the coasts of Sudan, the Red Sea and the eastern and northern boundaries of Ethiopia. The locust swarms could make their way to the Arab Peninsula and land in Yemen and in the heart of Saudi Arabia. Indeed, we should count our blessings, if by the end of May the locusts do not reach us.

The locust expert of the Food and Agriculture Organisation Tawfeeq Awad could not help laughing when an official in one of the Gulf countries told him that there was no need for an anti-locust campaign, as the locusts were thousands of miles away, and would probably face extermination in the course of travel.

Although there was no similar explicit attitude in the UAE, nevertheless, there is definitely some complacency in this regard as the Cabinet decision on allocating two million dirhams for the establishment of an equipped anti-locust unit still remains shelved somewhere in the

Ministry of Finance. So far, the decision, which is three years old, has not seen action. The story has to do with insecticides and spraying equipment, whether manual or mechanical, as well as the labour required.

The danger stemming from the desert locust should be quite clear as this could hopefully initiate some more to confront it.

The length of a swarm locusts is no less than twenty kilometres comprising about ten billion insects, weighing almost 3000 tons. The desert locust is a migrating type (travelling in huge swarms or clouds. Each female insect breeds by laying three pouches of eggs during its life span which is three months. Each pouch comprises 120 eggs. The male insect buries the egg cases in sandy humid grounds.

The dangers which the UAE could be subjected to are clearly discernible as the climate here provides the desert locust with the necessary elements for breeding and multiplying. Within one week, the eggs begin to hatch and millions of locusts emerge from the ground. In other words, the twenty long cloud of locust, assuming that half is comprised of female locusts, can give rise to another swarm five times large.

The latest UN statistics reported that locust swarms are distributed over ten million square miles, most of them within the African tropical belt, north-east and north-west Africa, as well as most of the Arab peninsula including Oman, Saudi Arabia, Yemen, the UAE and also Iran, Pakistan and India.

The locusts can reach the UAE from Sudan and Ethiopia in less than a week. The locusts travel with the wind, and therefore, the danger to the UAE exists until the end of May as the region, until that month, is exposed to tropical winds.

The locust swarms can travel daily from six to eight hours at a flying speed varying from 30 to 35 kilometres per hour. As temperature rise the locust become more active and they usually do their flying from sunrise to sunset. Thus their destructive work begins from sunset until the early hours of the morning.

At this point we could turn aside from the description of the locusts to ask ourselves as to what could happen if our land became their dining table.

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